202 457 0107 P.05/07

COMBINED DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that: My residence, post office address and citizenship are as stated below, next to my name. I believe I am the original, first, and sole inventor (if only one name is listed below) or an original, first, and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled DRUG PRODUCT FOR DIABETES, the specification of which:

☐ is attached hereto.

☑ was filed on November 25, 2003 as

United States Application Number 10/720,164, or

PCT International Application Number

and was amended on (If applicable).

I hereby state that I have reviewed and understand the contents of the above-identified application, including the claim(s), as amended by any amendment referred to above. I do not know and do not believe that the claimed invention was ever known or used in the United States of America before my invention thereof, or patented or described in any printed publication in any country before my invention thereof or more than one year prior to this application, that the same was not in public use or on sale in the United States of America more than one year prior to this application, and that the invention has not been patented or made the subject of an inventor's certificate issued before the date of this application in any country foreign to the United States of America on an application filed by me or my legal representatives or assigns more than twelve months (for a utility patent application) or six months (for a design patent application) prior to this application.

I acknowledge the duty to disclose all information known to me to be material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d), of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN/PCT AP	PLICATION(S) AND ANY PRIOR	ITY CLAIMS UNDER 35 U	.S.C. §119(a)-(d):
COUNTRY (if PCT, indicate "PCT")	APPLICATION NUMBER	DATE OF FILING (day, month, year)	PRIORITY CLAIMED UNDER 35 U.S.C. §119
Japan	166919/2001	01 June 2001	⊠Yes □No
			Yes No
			Yes No
			Yes No
			☐Yes ☐No

I hereby appoint Shelly Guest Cermak, Registration No. 39,571 of Alinomoto Corporate Services, LLC, telephone (202) 457 0284, with the following customer number and a mailing address at:

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with full power of substitution and revocation, to prosecute this application and to transact all business in the Patent and Trademark Office connected herewith.

The undersigned hereby authorizes the U.S. Attorney named herein to accept and follow instructions from undersigned's assignee, if any, and/or, if the undersigned is not a resident of the United States, the undersigned's domestic attorney, patent attorney or patent agent, as to any action to be taken in the Patent and Trademark Office regarding this application without direct communication between the U.S. attorneys and the undersigned. In the event of a change in the person(s) from whom instructions may be taken, the U.S. attorney named herein will be so notified by the undersigned.

Mailing Address

City, State, ZIP, Country

MAR-25-2004 •11:28 AJINOMOTO CORP SERV LLC 202 457 0107 P.06/07 I hereby declare that all statements made herein of my own knowledge are true and that all statements made on Information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application of any patent issued thereon.

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FULL NAME OF THIRD INVENTOR, IF ANY	
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